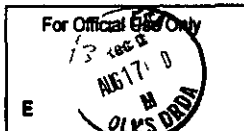


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U <u>9617</u>	2 Fiscal Year Covered From <u>1 / 1 / 2004</u> Through <u>12 / 31 / 2004</u>
3 Name and address of person filing Name <u>William P Kelley</u> P O Box Bldg Room No if any _____ Street <u>4958 WINTON RIDGE LANE</u> City <u>CINCINNATI</u> State <u>OHIO</u> ZIP Code + 4 <u>45232</u>	4 Name file number and address of labor organization Name <u>IRONWORKERS LOCAL 372</u> Labor Organization File Number <u>028342</u> P O Box Building and Room Number if any _____ Street <u>4958 WINTON RIDGE LANE</u> City <u>CINCINNATI</u> State <u>OHIO</u> ZIP Code + 4 <u>45232</u>
5 Position in labor organization _____	

Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions).

A. Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6 Name and address of Employer (including trade name if any) Name _____ Trade Name, if any: _____ P O Box Bldg Room No if any _____ Street _____ City _____ State _____ ZIP Code + 4 _____	7 a Nature of Interest, Transaction or Income. _____ 7 b Amount. _____

Signature

15. Signature and verification The undersigned declares, under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief true, correct, and complete (See the section on penalties in the instructions.)

Signed W.P. Kelley

On 8/10/05
Date

513-761-3720
Telephone Number

Name of Person Filing <u>WILLIAM KELLEY</u>	File Number U
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B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

<p>8 Name and address of Business (including trade name, if any)</p> <p>Name <u>IMPACT</u></p> <p>Trade Name if any _____</p> <p>P O Box, Bldg Room No if any _____</p> <p>Street <u>1750 NEW YORK AVE, NW LOBBY</u></p> <p>City <u>WASHINGTON</u></p> <p>State <u>DISTRICT OF COLUMBIA</u> ZIP Code + 4 <u>20006</u></p>	<p>9 Business deals with</p> <p><input checked="" type="checkbox"/> a Labor Organization</p> <p><input type="checkbox"/> b Trust</p> <p><input type="checkbox"/> c Employer</p>
<p>10 If 9.b or 9.c. is checked give trust or employer's name</p> <p>Name _____</p> <p>Trade Name if any _____</p> <p>P O Box, Bldg. Room No. if any _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ ZIP Code + 4 _____</p>	<p>11 a Nature of such dealing</p> <p><u>RECEIVES CONTRIBUTIONS FROM EMPLOYERS WHO HAVE COLLECTIVE BARGAINING CONTRACTS WITH LOCALS \$4,519,541 IMPACT LEASES OFFICE SPACE & EMPLOYEES FROM IRONWORKERS - \$1,057,284</u></p> <p>11 b Approximate dollar value of such dealing. <u>\$5,576,825</u></p> <p>12 a Nature of interest held or income received</p> <p><u>ST LOUIS REGIONAL CONFERENCE/IMPACT RAB APRIL 21, 2004 - ST LOUIS REGIONAL ADVISORY BOARD - FOOD & DRINKS</u></p> <p>12 b Amount. <u>\$99.00</u></p>

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

<p>13 a. Name and address of Employer or Labor Relations Consultant (including trade name, if any)</p> <p>Name _____</p> <p>Trade Name if any _____</p> <p>P O Box, Bldg. Room No. if any _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ ZIP Code + 4 _____</p>	<p>14 a Nature of payment</p> <div style="border: 1px solid black; height: 150px; width: 100%;"></div>
<p>13 b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14 b Amount of payment</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>

Name of Person Filing <u>WILLIAM KELLEY</u>	File Number U
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B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

<p>8. Name and address of Business (including trade name, if any)</p> <p>Name <u>IRONWORKERS SOV BENEFIT TRUST</u></p> <p>Trade Name if any _____</p> <p>P O Box Bldg Room No if any _____</p> <p>Street <u>1470 WORLDWIDE PLACE</u></p> <p>City <u>VANDALIA</u></p> <p>State <u>OHIO</u> ZIP Code + 4 <u>45377</u></p>	<p>9 Business deals with</p> <p style="padding-left: 20px;">a Labor Organization</p> <p style="padding-left: 20px;"><input checked="" type="checkbox"/> b Trust</p> <p style="padding-left: 20px;">c Employer</p>												
<p>10 If 9 b or 9 c. is checked give trust or employer's name</p> <p>Name _____</p> <p>Trade Name if any _____</p> <p>P O Box, Bldg. Room No if any _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ ZIP Code + 4 _____</p>	<p>11 a Nature of such dealing</p> <p style="font-size: 1.2em;"><u>REIMBURSED TRAVEL EXPENSES</u> <u>MONTHLY MEETINGS</u></p> <hr/> <p>11 b Approximate dollar value of such dealing. _____</p> <p>12 a Nature of interest held or income received</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">1-13-04 \$57.00,</td> <td style="width: 50%;">2-10-04 \$57.00</td> </tr> <tr> <td>3-9-04 \$57.00,</td> <td>4-26-04 \$57.00</td> </tr> <tr> <td>5-11-04 \$57.00,</td> <td>6-8-04 \$57.00</td> </tr> <tr> <td>7-14-04 \$57.00,</td> <td>8-10-04 \$57.00</td> </tr> <tr> <td>10-12-04 \$187.00,</td> <td>11-9-04 \$57.00</td> </tr> <tr> <td>12-14-04 \$57.00</td> <td></td> </tr> </table> <p>12 b Amount <u>\$757.00</u></p>	1-13-04 \$57.00,	2-10-04 \$57.00	3-9-04 \$57.00,	4-26-04 \$57.00	5-11-04 \$57.00,	6-8-04 \$57.00	7-14-04 \$57.00,	8-10-04 \$57.00	10-12-04 \$187.00,	11-9-04 \$57.00	12-14-04 \$57.00	
1-13-04 \$57.00,	2-10-04 \$57.00												
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5-11-04 \$57.00,	6-8-04 \$57.00												
7-14-04 \$57.00,	8-10-04 \$57.00												
10-12-04 \$187.00,	11-9-04 \$57.00												
12-14-04 \$57.00													

<p>C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</p>	
<p>13 a. Name and address of Employer or Labor Relations Consultant (including trade name, if any)</p> <p>Name _____</p> <p>Trade Name if any _____</p> <p>P O Box Bldg Room No if any _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ ZIP Code + 4 _____</p>	<p>14 a. Nature of payment</p> <div style="border: 1px solid black; height: 150px; width: 100%;"></div>
<p>13 b Is the Business an Employer _____ or Consultant _____ ?</p>	<p>14 b Amount of payment. _____</p>

Name of Person Filing <u>WILLIAM KELLEY</u>	File Number U
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B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name, if any) Name <u>IRONWORKERS SOV BENEFIT TRUST</u> Trade Name if any _____ P O Box Bldg Room No if any _____ Street <u>1470 WORLDWIDE PLACE</u> City <u>VANDALIA</u> State <u>OHIO</u> ZIP Code + 4 <u>45377</u>	9 Business deals with a Labor Organization <input checked="" type="checkbox"/> b. Trust c. Employer
10 If 9 b or 9 c. is checked give trust or employer's name Name _____ Trade Name if any _____ P O Box, Bldg. Room No. if any _____ Street _____ City _____ State _____ ZIP Code + 4 _____	11 a Nature of such dealing 11 b Approximate dollar value of such dealing _____ 12 a. Nature of interest held or income received <u>2/1/05 380.00</u> <u>REIMBURSED EXPENSES FOR TRUSTEE</u> <u>TRAVEL TO EDUCATIONAL CONFERENCE</u> 12 b Amount <u>\$380.00</u>

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a. Name and address of Employer or Labor Relations Consultant (including trade name, if any) Name _____ Trade Name if any _____ P O Box Bldg Room No If any _____ Street _____ City _____ State _____ ZIP Code + 4 _____	14 a. Nature of payment 14 b Amount of payment _____
13 b Is the Business an Employer _____ or Consultant _____ ?	

Name of Person Filing <u>WILLIAM KELLEY</u>	File Number U
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B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

<p>8 Name and address of Business (including trade name, if any)</p> <p>Name <u>SEI INVESTMENT COMPANY</u></p> <p>Trade Name if any _____</p> <p>P O Box, Bldg Room No if any _____</p> <p>Street <u>ONE FREEDOM VALLEY DRIVE</u></p> <p>City <u>OAKS</u></p> <p>State <u>P.A.</u> ZIP Code + 4 <u>19456</u></p> <p>10 If 9 b or 9 c. is checked give trust or employer's name</p> <p>Name _____</p> <p>Trade Name if any _____</p> <p>P O Box, Bldg. Room No if any _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ ZIP Code + 4 _____</p>	<p>9 Business deals with</p> <p>a Labor Organization</p> <p>b Trust</p> <p><input checked="" type="checkbox"/> c. Employer</p> <p>11 a Nature of such dealing</p> <p><u>DINNER AT NEW ORLEANS CONFERENCE</u></p> <p>11 b Approximate dollar value of such dealing _____</p> <p>12 a Nature of interest held or income received</p> <p><u>166.00 (DINNER WIFE & SELF)</u></p> <p>12 b Amount <u>\$166 00</u></p>
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<p>C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</p>	
<p>13 a Name and address of Employer or Labor Relations Consultant (including trade name, if any)</p> <p>Name _____</p> <p>Trade Name if any _____</p> <p>P O Box, Bldg Room No if any _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ ZIP Code + 4 _____</p> <p>13 b Is the Business an Employer _____ or Consultant _____ ?</p>	<p>14 a Nature of payment</p> <p>_____</p> <p>14 b Amount of payment</p> <p>_____</p>